



238262

Print Form

CLASS C AMENDMENT FORM

File the original with:

Public Service Commission of South Carolina
Clerk's Office
Motor Carrier Matters
P.O. Box 11649
Columbia, S.C. 29211
(803) 896 - 5100
FAX (803) 896-5199

Mail or fax a copy to:

S.C. Office of Regulatory Staff
Transportation Department
1401 Main Street, Suite 900
Columbia, S.C. 29201
(803) 737-0578
FAX (803) 737-0815

DATE: June 25, 2012

I have the following Certificate:

☒ Class C Taxi # 8610 ☐ Class C Charter # ☐ Class C Charter Bus #
☐ Class C Non-Emergency #

Please consider this as my request for the following amendment(s) to my Certificate:

☒ Name Change

From: Edward Smalls DBA: _____
(Current Name) (Current DBA if applicable)
TO: E B TAXI DBA: E 4 B TAXI
(New Name) (New DBA if applicable)

☐ Scope of Authority

From: N/A To: _____
(Current Scope) (New Scope)

☐ Passenger Limit

From: N/A To: _____
(Current Limit Number) (New Limit Number)

Edward Smalls
Name & DBA if DBA is applicable)

2764 Saranya Road
(Street and/or Mailing Address)

North Charleston S.C 29405
(City, State, Zip Code)

Edward Smalls
(Signature)

843-609-0183
(Telephone Number)

Edward Smalls
(Title) Owner, President, etc.